

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009129

FILED
May 01, 2008
Secretary of State

Entity Name: FLORIDA ALLIANCE OF PARALEGAL ASSOCIATIONS, INC.

Current Principal Place of Business:

226-5 SOLANA ROAD
SUITE 177
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

11710 SW 119 PLACE ROAD
MIAMI, FL 331865119 US

Current Mailing Address:

226-5 SOLANA ROAD
SUITE 177
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

P.O. BOX 31-0745
MIAMI, FL 332310745 US

FEI Number: 37-1496796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STRINGFELLOW, TANA J CP
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

VESSELS, LISA B CP
11710 SW 119 PLACE ROAD
MIAMI, FL 331865119 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LISA VESSELS

05/01/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STRINGFELLOW, TANA J CP
Address: 226-5 SOLANA ROAD, SUITE 177
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T () Delete
Name: LONG, VERA CLAS
Address: 777 SOUTH FLAGLER DRIVE, SUITE 500E
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP () Delete
Name: LEVINE, SUSAN CLAS
Address: P.O. BOX 2094
City-St-Zip: SARASOTA, FL 34230

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VESSELS, LISA B CP
Address: P.O. BOX 31-0745
City-St-Zip: MIAMI, FL 332310745 US

Title: T (X) Change () Addition
Name: HARDY, REBECCA S FRP
Address: P.O. BOX 31-0745
City-St-Zip: MIAMI, FL 332310745 US

Title: VP (X) Change () Addition
Name: STARKS, JOHN JR
Address: P.O. BOX 31-0745
City-St-Zip: MIAMI, FL 332310745 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA VESSELS

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date